

Application Data Sheet



Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Title Line One:: APPARATUS AND METHODS FOR
Title Line Two:: FORMING AND SECURING
Title Line Three:: GASTROINTESTINAL TISSUE
Title Line Four:: FOLDS
Attorney Docket Number:: USGI-005-2A
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 41
Small Entity:: Yes
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Vahid
Middle Name:: C.
Family Name:: Saadat
Name Suffix::
City of Residence:: Saratoga
State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address:: 12679 Kane Drive
City of Mailing Address:: Saratoga
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 95070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ken
Middle Name::
Family Name:: Michlitsch
Name Suffix::
City of Residence:: Livermore

State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address: 4613 Pamela Commons
City of Mailing Address:: Livermore
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94550

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Rich
Middle Name::
Family Name:: Ewers
Name Suffix::
City of Residence:: Fullerton
State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address: 1437 W. Malvern
City of Mailing Address:: Fullerton
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92833

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Chris
Middle Name::
Family Name:: Rothe
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address: 1593 Sabina Way
City of Mailing Address:: San Jose
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 95118

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Rodney
Middle Name::
Family Name:: Brenneman
Name Suffix::

City of Residence:: San Juan Capistrano
State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address: 34002 Las Palmas Del Mar
City of Mailing Address:: San Juan Capistrano
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92675

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Cang
Middle Name:: Lam
Family Name::
Name Suffix::
City of Residence:: Irvine
State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address: 74 Stanford Ct.
City of Mailing Address:: Irvine
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92612

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eugene
Middle Name:: Chen
Family Name::
Name Suffix::
City of Residence:: Carlsbad
State or Province of Residence:: California
Country of Residence:: US
Street of Mailing Address: 3600 Corte Castillo
City of Mailing Address:: Carlsbad
State or Province of Mailing Address:: California
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 92009

Correspondence Information

Correspondence Customer Number:: 35023
Phone Number:: 858.720.6320
Fax Number:: 858.523.4326

Representative Information

Representative Designation::	Registration Number::	Representative Name::
Primary	34,408	Nicola A. Pisano
Associate	32,967	Mitchell P. Brook
Associate	42,651	David E. Heisey

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-Part of	10/672,375	September 25, 2003
10/672,375	An application claiming the benefit under 35 USC 119(e)	60/500,627	September 5, 2003
This Application	Continuation-in-Part of	10/612,170	July 1, 2003
10/612,170	An application claiming the benefit under 35 USC 119(e)	60/433,065	December 11, 2002
This Application	Continuation-in-part of	10/639,162	August 11, 2003
10/639,162	An application claiming the benefit under 35 USC 119(e)	60/433,065	December 11, 2002
This Application	Continuation-in-part of	10/173,203	June 13, 2002
This Application	Continuation-in-part of	10/458,060	June 9, 2003
10/458,060	Continuation-in-part of	10/346,709	January 15, 2003
10/458,060	An application claiming the benefit under 35 USC 119(e)	60/471,893	May 19, 2003

This Application	Continuation-in-part of	10/288,619	November 4, 2002
10/288,619	Continuation-in-part of	09/746,579	December 20, 2000
10/288,619	Continuation-in-part of	10/188,509	July 3, 2002
10/188,509	Continuation-in-part of	09/898,726	July 3, 2001
09/898,726	Continuation-in-part of	09/602,436	June 23, 2000
09/602,436	An application claiming the benefit under 35 USC 119(e)	60/141,077	June 25, 1999

Assignment Information

Assignee Name:: USGI MEDICAL
 Street of Mailing Address:: 3511 Thomas Rd. Ste. 1
 City of Mailing Address:: Santa Clara
 State or Province of Mailing Address:: California
 Country of Mailing Address:: US
 Postal or Zip Code of Mailing Address:: 95054

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